

Assertive Community Treatment (ACT) in Iowa

Assertive Community Treatment (ACT) is an effective, evidence based treatment to provide in home treatment, support, and rehabilitative care to persons with serious mental illnesses such as schizophrenia.

Governmental and professional organizations endorse ACT as a *fundamental element* in a mental health service system. ACT teams have expanded in the United States and internationally. In the midwest, ACT is available statewide in Indiana, Wisconsin, Michigan and Minnesota.

How many ACT teams are in Iowa? When did the first team start?

There are five ACT Programs in Iowa: Iowa City, Cedar Rapids, Des Moines, Fort Dodge, and Council Bluffs. The first team started in Iowa City out of the University Hospitals in 1996.

What is the “success rate” of Iowa ACT teams?

Iowa ACT teams are proven effective*.

- **80% reduction in hospital days**
- **80% reduction in jail time**
- **75% reduction in homeless days**
- **2.5x more likely to be employed**

**Outcome studies supported by the Iowa Department of Human Services through its contract with Magellan Health Services for Iowa Plan for Behavioral Health Community Reinvestment funding.*

ACT seems labor intensive with the number of staff and frequent visits to the home. How does this program save money in the long run?

ACT is cost neutral to cost savings because ACT reduces expensive hospital/residential care facility days. ACT costs between \$1,000 and \$1400 per patient per month. If that patient were to be in residential care, it can cost nearly four times that much per month. Acute hospitalization costs can exceed \$1,000 per day. The key is to only admit people who have shown they really need this level of care ~ as evidenced by at least two hospitalizations in the last year or needing residential care (institutional living).

Iowa ACT teams are cost effective*.

A cost analysis for an ACT team in Iowa showed costs before ACT averaged \$1532 per month, after ACT averaged \$1322 per month. These results are consistent with over two dozen randomized controlled trials of ACT that have been done in the United States showing ACT to be neutral to cost savings.

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How many teams does Iowa need?

ACT is currently available in only three of the five largest metro areas (Des Moines, Cedar Rapids, Iowa City)

We can estimate how many teams are needed based on the adult population:

Des Moines: 3 teams
Cedar Rapids: 2 teams
Davenport: 2 teams
Waterloo: 2 teams
Dubuque
Iowa City
Ames
Sioux City
Mason City

These fourteen teams would cover the largest population areas in the state.

Can ACT be a replacement for institutions?

ACT is not intended to replace residential care. However, ACT can decrease the numbers of people that need to live in institutions. Some people have a severity of illness that precludes less than 24 hour per day care.

What is the average start up costs for ACT in a county or a region?

Costs will vary from location to location. Teams will be self supporting once they have enough clients to cover costs. It will take at least seven months and sometimes up to a year to have enough clients to cover staff salaries and other program costs. \$500,000 is a reasonable ballpark figure, dependent on how fast the team adds clients.

What are the barriers to getting more teams in Iowa?

Start up costs and availability of psychiatrists. Other states have met these challenges by legislating start up money for ACT teams. Also, nurse practitioners and physician assistants (with psychiatrist supervision) are now accepted in most states to provide the prescriber role in ACT teams in areas of psychiatric work force shortage.

Iowa has an existing ACT Technical Assistance Center eager to provide consultation to communities interested in starting an ACT team. We can provide readiness assessments for communities, help educate local stakeholders, provide start up training and ongoing education to staff, and work with your agency to collect and analyze individual and gather statewide team ACT outcomes.

For more information:

Nancy Williams, M.D.
Medical Director, IMPACT Program
ACT Technical Assistance Center
319 356-3869
or
Betsy Hradek, ARNP
Team Leader, IMPACT Program
ACT Technical Assistance Center
319 356-1754